PTO/SB/06 (08-03)
Approved for use through 7/31/2008, OMB 0551-0032
ademark Office; U.S. DEPARTMENT OF COMMERCE

				ATION	I FEE DETI	ERMINATIO			ONTERIOR COME		on & paid OMB of Docket No.	
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY										ok.	OTHER THAN SMALL ENTITY	
FOR HUMBER FILED					NUM	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.18(a))							1			OR		
YOTAL CLAIMS (37 CFR 1.18(2))			70	minus 20						•		-
INDEPENDENT CLAIMS			=							COR	<b> </b>	
(37 CFR 1.16(b)) S minus 3 = 1*							× 1		OR	× 4		
MULTIPLE DEPENDENT-CLAIM PRESENT (27 CFR 1.16(4))								**		OR	+4	ļ
$^{\circ}$ if the difference in column 1 is less than zero, enter $^{\circ}0^{\circ}$ in column 2.								TOTAL		OR	TOTAL	<u> </u>
	, CLAIMS AS AMENDED - PART II											
		(Colum			(Column 2) (Column 3)			SMALL I	NTITY	OR		R THAN ENTITY
AMENDMENT A		REMA	IMS DVING TER DMENT,		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S	Total profit secu		24	Minus	-22	. 2		× 4		OR	x.50.	100
N N	Independent (37 GR L WIND		3	Minus	" A		ļ	x 8 =		OR	x	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAME (17 CFR 1,16(d))							+1 0		OR	+:	7)
	14/1/06							TOTAL ADD'L FEE		Dog	TOTAL	18000
	71100	(COOLIN			(Cotumn 2)	(Column 3)		7				
AMENDMENT B	•	CLA REMA AFT AMENC	INING		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE
	Total of control	'24		Minus	- 24	•		x 3e		OR	× 8	
EN	Independent (37 CPR 1,18(19)	. 3		Minus	-3'			X 8 =		OR	X \$	
₹	FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(0))							+2 .		OR	+10	
	011						TOTAL ADOL FEE		OR	TOTAL ADO'L FEE		
	4.NE	(Colum			(Column 2)	(Column 3)						
AMENDMENT C	4-09-01	CLA REMAI AFT AMEND	NING	•	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADOI- TICNAL FEE
	Total (17 GFR L10(c)	2	3	Minus	24	•		×		OR	×e	
	Independent (37 CM L16(16)		3	Minus	-(3	• -		X 5=		OR	ו•	
¥	PRIST PRESENTATION OF MULTIPLE DEPENDENT CLASM (37 CFR 1.18(d))							+2 -		OR.	• •	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	·	
***	" If the "Highest I If the "Highest IA The "Highest IA	tumber Pa tumber Pa umber Pre	reviously reviously reiously P	Paid For Paid For aid For (	in column 2, with this SPACE IN THIS SPACE IN THIS SPACE Total or Independent 1,18. The Info	is less then 20, is less then 3, a dent) is the high:	ent rilet est r	"3". number found in	ne appropriat	e box in co	dumn 1.	

USPTO to process) an explication. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclividual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this bardon, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A 22313-1450, OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A 22313-1450.

If you need autistance in completing the form, call 1-800-PTO-0199 and celect option 2.